

# Work Order ID 90659

\*90659\*

Page 1

September-21-12 11:38:08 AM

Item ID: D3029-1 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Spring  
 Start Date: 9/25/12 Start Qty: 20.00 \*20\* Cust Item ID:  
 Required Date: 10/12/12 Req'd Qty: 20.00 \*20\* Customer:  
 Reference:

Approvals: Process Plan: MLJ Date: 12-09-21 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_  
 Run Start \*NR1\*  
 Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3029	Rev A								

100

0.00

\*100\*

Purchasing

Purchasing

PURCHASING

Memo

Issue P/O: 17983

Possible supplier: Northern Aero Industries

Order P/N B83605-1

Material: Ø0.041" piano wire

Dimensions: Mean dia. = 0.625" Pitch = 0.20" Length = 1.20"

All dimensions are in inches

Tolerances are per Dart QSI 018 unless otherwise noted

CX 12/09/24 (20)

110

Receive & Inspect for Damage & Mat'l Certs

0.00

\*110\*

Packaging

Packaging

Memo

Ensure Material Release Note is attached

0.00

4/2/16 (20)

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
<b>Landing Gear</b>			<b>General</b>						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

# Work Order ID 90659

\*90659\*

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Item ID: D3029-1 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Spring  
 Start Date: 9/25/12 Start Qty: 20.00 \*20\* Cust Item ID:  
 Required Date: 10/12/12 Req'd Qty: 20.00 \*20\* Customer:  
 Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start \*NR1\*  
 QC: Date: SPC (Y/N): Date: Stop \*NR2\*


Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC6- Inspect dimensions to drawing  Memo	0.00 0.00		DAS 18 12/10/17		20			
130 *130* Small Fab Small Fab	Small Fab  Memo Cut # 65 Ajax Spring in 1/2 as per Dwg D3029	0.00 0.00				20x			12/10/17
140 *140* QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo	0.00 0.00							12/10/17

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

# Work Order ID 90659

September-21-12 11:38:08 AM

**\*90659\***

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Item ID: D3029-1

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Spring

Start Date: 9/25/12 Start Qty: 20.00

**\*20\***

Cust Item ID:

Required Date: 10/12/12 Req'd Qty: 20.00

**\*20\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Identify as per dwg & Stock Location: <u>GA</u>	0.00							
<b>*150*</b>									
Packaging	Memo	0.00				<u>20</u>			<u>Sp</u> <u>12/10/17</u>
Packaging									
160	QC21- Final Inspection - Work Order Release	0.00							
<b>*160*</b>									
QC	Memo	0.00							<u>12/10/18</u> <u>JD</u>
Quality Control									

u 12.10.17

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Picklist Print

September-21-12 11:38:08 AM

Page 1

Work Order ID: 90659

Parent Item: D3029-1

Parent Item Name: Spring

Start Date: 9/25/12

Required Date: 10/12/12

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP: C05.03.10Changed SupplierKJ/JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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B83605-1 LOCK		Purchased	No			110	Each	6.0000	1	20			
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Location

Loc Qty

Loc Code

ST

6

85518

6

*Handwritten signature and date 9/26/12*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

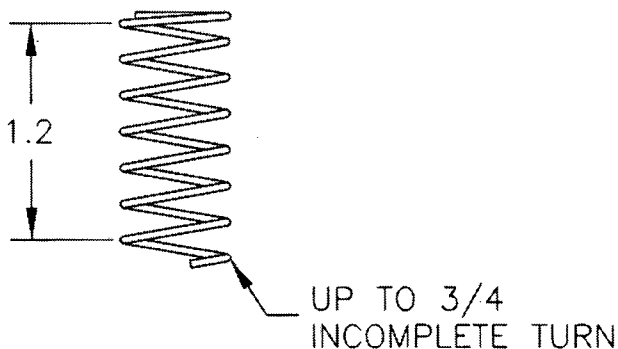
Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		





DESIGN <i>CP</i>	DRAWN BY <i>CP</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED <i>#</i>	APPROVED <i>#</i>	DRAWING NO. D3029	REV. A SHEET 1 OF 1
DATE 01.05.18		TITLE SPRING	SCALE 1:1
A	01.05.18	NEW ISSUE	

## SPECIFICATION CONTROL DRAWING



D3029-1

- 1) DIMENSIONS: MEAN DIAMETER: 0.625  
PITCH: 0.20  
LENGTH: 1.2
- 2) MATERIAL:  $\phi$ 0.041 PIANO WIRE
- 3) POSSIBLE SUPPLIERS: NORTHERN AERO INDUSTRIES P/N B83605-1  
ADAMS SUPPLY LTD., 1/2 OF #65 AJAX SPRING
- 4) ALL DIMENSIONS ARE IN INCHES
- 5) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHIN 30 DAYS  
WORK ORDER  
NO. 90658 HCS  
12-09-21

RELEASED  
01.05.20

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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO17983

Purchase Order Date 9/24/12

PO Print Date 9/25/12

Page Number 1 of 1

Order From :

VU-NOR003

NORTHERN AERO INDUSTRIES LTD.  
25 DUNLOP AVENUE  
WINNIPEG, MB R2X 2V2  
CA

Contact Name

Vendor Phone

204-772-9922

Vendor Fax

204772-7568

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAKED**

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
2	B83603-1	Lock	10/12/12 Yes	12.00 Each	FedEx PI collect	\$85.0000	\$1,020.00

Special Inst: AS PER DWG D3030 REV. A  
B90641

MATERIAL: 2024-T3 AS PER QQ-A-225/6  
0.010" MAX DIFF. BETWEEN 0.525" DIM.  
EACH SIDE  
ALL DIAMETERS CONCENTRIC WITHIN  
0.005 T.I.R  
ALL DIMENSION ARE IN INCHES

3	B83605-1	SPRING	10/12/12 Yes	20.00 Each	FedEx PI collect	\$12.0000	\$240.00
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Special Inst: AS PER DWG D3029 REV. A  
B90659

MATERIAL: Ø0.041" PIANO WIRE  
DIMENSIONS: MEAN DIA. = 0.625"  
PITCH = 0.20" LENGTH = 1.20"  
ALL DIMENSION ARE IN INCHES

**CERTIFICATE OF CONFORMITY  
REQ'D UPON DELIVERY**

PO Total:

\$1,260.00

Change Nbr:

2

Change Date: 9/25/12

No substitution or deviation without  
consent.

Certificate of Conformity or Material  
Certification required - YES **NO**



Engineering, Certification & Manufacturing

# Packing Slip

**ACS-NAI Ltd.**

25 Dunlop Avenue  
R2X 2V2 Winnipeg  
Canada  
Tel : 204-772-9922  
Fax : 204-772-7568

SO: 27582

Delivery No. : 3169  
Delivery Date : 10/15/2012  
SO No. : 27582  
Your Reference : PO: 17983  
Delivery Method : FEDEX  
Payment Condition : Net 30 Days

**Delivery to:** Dart Aerospace Ltd.

Attention: Chantal Lavoie  
1270 Aberdeen Street

Hawkesbury K6A 1K7  
Canada

B83605-1	SPRING 12-3866	20 EA	20	10/15/2012
B83603-1	LOCK 11-4297 (2) 12-3345 (10)	12 EA	12	10/15/2012

Ship via FedEx P1 to account # 151793240  
Email: clavoie@dartaero.com

Ph: 613-632-9577

Packages: 0

Gross Weight: 0.00

Net Weight:

**Ordered by:** Dart Aerospace Ltd.

Attention: Chantal Lavoie  
1270 Aberdeen Street  
Hawkesbury K6A 1K7  
Canada

**Invoice to:** Dart Aerospace Ltd.

0.00

Attention: Accounts  
1270 Aberdeen Street  
Hawkesbury K6A 1K7  
Canada

I hereby certify that the aircraft part(s) described hereon were acquired from a source of supply that is consistent with the conditions under which TCCA distributor approval AMO88-97 has been granted.

Signatory

Date:



Engineering, Certification & Manufacturing

25 Dunlop Ave  
Winnipeg, Manitoba, Canada, R2X 2V2  
Ph: 204-772-9922 Fax: 204-772-7568

### CERTIFICATE OF CONFORMITY

Form Tracking No. 27582-1

Work Order/Contract/Invoice: PO 17983

Cage Code: MFR L0555

Item	Description	Part No.	Quantity	Serial/Batch	Status
1	Lock	B83603-1	2	11-4297	New
2	Lock	B83603-1	10	12-3345	New
3	Spring	B83605-1	20	12-3866	New

812160117

#### Remarks:

THESE ITEMS CONFORM TO DESIGN DATA B83603 (REV. NC) AND B83605 (REV. NC), AS APPLICABLE.

#### New-Unused Parts/Material Certification

The items described above have been manufactured using standards employed by a TCCA approved manufacturer in accordance with CAR 561 and a AS9100 Quality Assurance System.

Signature

Name R. D. WILLIAMSON

Date (dd mmm yyyy)  
15-Oct-12

#### Used, Repaired or Overhauled Parts Certification

The items described above have been maintained using standards employed by a TCCA approved maintenance organization in accordance with CAR 573 and a AS9100 Quality Assurance System.

Signature

Name

Date (dd mmm yyyy)

User/Installer Responsibilities: This certificate does not constitute authority to install the item(s) described above on an in-service type certified aircraft.